



Patent
Attorney's Docket No. 033877-21(formerly 16503-21)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

TSENG, et al.

Application No.: 09/373,104

Filed: August 11, 1999

For: VCD-ON-DEMAND SYSTEM AND
METHOD

) MAIL STOP NON-FEE AMENDMENT
)
) Group Art Unit: 2123
)
) Examiner: Thangavelu, K.
)
) Confirmation No.: 2128
)
)
)
)

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Certificate of Mailing Pursuant to 1.8(a)

I certify that this paper is being deposited with the U.S. Postal Service as First Class Mail with sufficient postage addressed to Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 10, 2003.
Paula S. Cunningham
Paula S. Cunningham

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- [] A Petition for Extension of Time is also enclosed.
- [] A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.
- [X] Also enclosed are (i) Revocation and New Associate Power of Attorney and (ii) Associate Power of Attorney to Derwin & Siegel.
- [] Small entity status is hereby claimed.
- [] Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$375.00 (2801) [] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- [] Applicant(s) previously submitted __, on __, for which continued examination is requested.

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☒ [X] No additional claim fee is required.

☐ [] An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	22	MINUS 22 =	0	× \$18.00 (1202) =	00.00
Independent Claims	2	MINUS 3 =	0	× \$84.00 (1201) =	00.00
If Amendment adds multiple dependent claims, add \$280.00 (1203)					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

☐ [] A claim fee in the amount of \$_____ is enclosed.

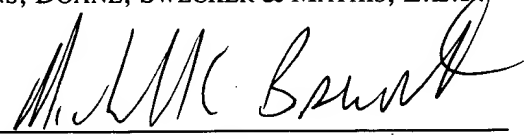
☐ [] Charge \$_____ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: June 10, 2003

By: 
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